

Adult Protective Services

Chapter 8.A Documentation

- A. Documentation must be complete on all APS cases. The CFS Specialist will enter documentation into N-FOCUS APS program case regarding an APS investigation and Self-neglect assessment and for ongoing service coordination. For the Organization Related Investigation, the CFS Specialist will document in N-FOCUS in this section. If one of the victims requires service coordination, then, an APS program case will be opened.
- B. Record Keeping: Records are maintained to:
 - 1. Support decision-making;
 - 2. Maintain an ongoing assessment of the adult victim's needs from the community's and the Department's perspective;
 - 3. Determine trends;
 - 4. Identify service needs and make decisions regarding staff allocation to meet those service needs;
 - 5. Enhance quality; and
 - 6. Comply with the law.
- C. Case File – (not an inclusive list)
 - 1. APS Intake Form with the priority of case and any reprioritization;
 - 2. Date Intake form is sent to law enforcement;
 - 3. Investigation Narratives;
 - a. Date(s) and type(s) of all contacts with the vulnerable adult;
 - b. Date(s) and type(s) of all collateral contacts;
 - 4. Documentary Evidence - reports and records received from other sources;
 - 5. Demonstrative Evidence – maps, diagrams, and photographs;
 - 6. CFS Specialist observations;
 - 7. CFS Specialist decisions;
 - 8. Need for and authorization of emergency services;
 - 9. Authorizations to release information;
 - 10. Documentation of coordination with the local law enforcement, the Division of Developmental Disabilities, the Licensing Unit, and the Division of Medicaid and Long-term Care.
 - 11. Investigation Summary or Organization Related Investigation summary which includes the finding;
 - 12. Referral(s) to the county attorney or other attorney assisting in obtaining a guardianship, conservatorship, or other legal action the Department has determined as an appropriate remedy to abuse/neglect;
 - 13. Community resource referrals;
 - 14. Service Coordination Plan;
 - 15. Court intervention action, including copies of all legal documents;
 - 16. Date Investigation Summary or Organization Related Investigation summary is sent to law enforcement and to the county attorney;
 - 17. Notification of person alleged to have abused, neglected, or exploited a vulnerable adult;
 - 18. Notification of the vulnerable adult or his/her legal representative of the finding if the person alleged to have abused, neglected, or exploited him/her will be listed on the Registry.
 - 19. Date(s) and type(s) of supervisory consultation; and
 - 20. Case closure Summary.

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- D. The electronic case file is located on N-FOCUS. Documentation is entered into N-FOCUS at intake and throughout the case. When needed, the various forms such as the Intake form, the investigation summary, perpetrator notification letter, or case status determination form may be printed from N-FOCUS.
- E. 1st Face-to-Face Contact Exceptions
The CFS Supervisor may enter contact exceptions when a worker has not met the 1st Face-to-face timeframe for specific reasons and are documented in the intake detail window.
Contact Exceptions – Supervisor
- 1) Unable to Locate
 - 2) Unable to Identify
 - 3) Refused to meet
- F. Investigation Exceptions
The Administrator may enter exceptions for investigation timeframes for specific reasons and these are documented in the intake detail window:
Contact Exceptions – Administrator
- 1) Law enforcement hold: Law enforcement has notified APS to discontinue investigating until further notice.
 - 2) Administrative Intake: No contact needed; as in the case of a conviction of abuse of a vulnerable adult and APS wasn't involved. The finding will be entered. If this narrative is used, the CFS Specialist will open a Program Case and tie it to the intake. The worker will gather the court documents and law enforcement reports for the file.
- G. Document Imaging –
1. CFS – Protection & Safety staff have the ability to add documents to N-FOCUS by using the Document Imaging functionality.
 2. The two Document Imaging icons are located on the Person Detail window, The Master Case window, and Detail Organization window. With these icons you can either add an image (document) or Search or view documents that have already been added.
 3. There are 6 new Categories that will be specific to CFS/OJS documents.
 4. **Note:** The Category 'Restricted' is the equivalent to the Appendix in a current paper Case file.
 5. One of the features of Document Imaging is that it allows a user to, "Drag and Drop" a document(s) directly from your Outlook Mail list. The CFS Specialist can then save the email note itself and/or any attachments that are in the note.
Note: The "Drop and Drag" function is not available to users who access N-FOCUS through the CITRIX system.
 6. The CFS Specialist will also be able to add documents that are sent to them as paper documents, i.e. Court Orders, Therapy Reports, Law Enforcement reports, by utilizing the scan function on the office copy machine.
 7. Users can also find instructions by going to the CWIS Desk Aide, Document Imaging, located in the DHHS Employee Intranet, under either the Children and Family Services tag or CFS Home tag.
 8. There are security elements within the Document Imaging area. This will control who can add documents to specific categories and who can view documents in specific

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categories. The security will be based on the user's N-FOCUS Log-on ID and will determine which categories will be enabled for adding and/or viewing documents.

Note: The security for the Category, 'Restricted' is modeled after the current security for using the Appendix narrative in N-FOCUS.

9. ORG Related Investigations

When the Licensing Unit submits their investigation report to Central Office; support staff forwards the licensing report to the CFS Specialist and add the report using the document imaging function to the Organization in N-FOCUS as Correspondence.

10. Documents that are scanned may be shredded unless the original copy is needed.

Examples of original documents to be kept in the file are the original letter from a physician, death certificate, Authorization to Release Information, photographs, Power of Attorney or will.

E. A physical case file is organized in the following manner:

1. Tab - Intake Form

- Current APS Intake Form

2. Tab - Case Status Determination

- Current Case Status Determination Form

3. Tab - Assessment Form

- Current APS Assessment Form
- Other Assessments Completed

4. Tab - Financial Records

- Bank Statements
- Verification of Income/Resources
- Release of Information/Copy of Subpoena

5. Tab - Medical Records

- Mental Health Records
- Physical Health Records
- Release of Information/Copy of Subpoena

6. Tab - Narratives

- Chronological documentation of all client and collateral contacts to include the service plan

7. Tab - Services

- Service authorizations
- APS Funds request form
- Billings

8. Tab - Correspondence

- Letters received
- Letters sent

9. Tab - Legal Documents

- Court Orders
- Guardian/Conservator Petitions, Letters, Acceptance Forms
- Journal Entries
- Subpoenas
- Report to the County Attorney
- Non-Court Documents (POA, etc)

10. Tab - Miscellaneous

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APPENDIX (separate file)

- Legal contacts
- Verbal and written correspondence with HHS Legal Division, County Attorney, Attorney General's office, private attorney involved with petitions for guardianships, etc.
- Law Enforcement Reports